COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Filter unit for filtering particles contained in exhaust gas of an internal combusting engine"

the spe	cification of which: (checi	k one)			
	•	REGULAR OR DESIG	N APPLICATION		
	is attached hereto.				
	was filed on	as applica	tion Serial No.		
		(if		, , ,	
	PCT	FILED APPLICATION ENT	ERING NATIONAL STAGE	•	
	was described and claimed in International application No. <u>PCT/FR2004/001855</u> filed on <u>July 15, 2004</u> and as amended on(if any).				
l hereb claims,	y state that I have review as amended by any ame	ved and understand the corndment referred to above.	ntents of the above-identified s	pecification, including the	
	owledge the duty to disclostions, §1.56.	se information which is mate	rial to patentability as defined in	Title 37, Code of Federal	
.		PRIOR FOREIGN A	PPLICATION(S)	Delocity	
·	Country	Application Number	Date of Filing (day, month, year)	Priority Claimed	
	FRANCE	03 08776	18 July 2003	Yes	
	y claim the benefit under listed below:	Title 35, United States Code	§119(e) of any United States pr	ovisional patent applica-	
Applica	ation No.	Filing Date	Status (patented	pending abandoned)	
(Comp	lete this part only if this is	a continuing application.)			
ject ma provide patenta	atter of each of the claims ed by the first paragraph ability as defined in Title 3	of this application is not disc of 35 USC 112, I acknowled	States application(s) listed below losed in the prior United States dge the duty to disclose inform ons §1.56 which became availabiling date of this application:	application in the manner ation which is material to	
Applica	ation No.	Filing Date	Status (patented	pending abandoned)	

POWER OF ATTORNEY

0525-1032

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from _____ as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the registered patent attorneys represented by Customer No. 00466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, including: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Thomas W. PERKINS, Reg. No. 33,027, Roland E. LONG, Jr., Reg. No. 41,949, Eric JENSEN, Reg. No. 37,855, and Liam MCDOWELL, Reg. No. 44,231,

c/o YOUNG & THOMPSON Second Floor 745 South 23rd Street Arlington, Virginia 22202 **Customer Number**

00466

Address all telephone calls to Young & Thompson at 703/521-2297. Telefax: 703/685-0573.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's signature:		Date:	
Residence:		_ Citizenship:	
Post Office Address:	· · · · · · · · · · · · · · · · · · ·	······································	
Full name of third joint	inventor, if any:		
Inventor's signature:		Date:	
Residence:		Citizenship:	
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Full name of fourth join	nt inventor, if any:	·	
Inventor's signature:		Date:	
Residence:		Citizenship:	
Post Office Address			